24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Conservative Campaign Committee	
	C C00495010
Check if X 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
WWL -TV	M M / D D / Y Y Y
Mailing Address 1024 N Rampart Street	11 20 2014 Amount
City State Zip Code	1207
New Orleans LA 70116-2406	Transaction ID: 135409 Date of Disbursement or Obligation
Purpose of Expenditure 11/20 and 11/21 Television Category/ Type	11 19 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Mary Landreau Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary X General
	Other (specify) -
Full Name of Payee WGNO/WNOL	Date of Public Distribution/Dissemination
Mailing Address 1 Galleria Boulevard	11 20 2014
Suite 850	Amount
City State Zip Code	1666
Metairie LA 70001-7542	Transaction ID : 135749 Date of Disbursement or Obligation
Purpose of Expenditure 11/20 and 11/21 Television Advertising Category/ Type	11 19 / 2014
Name of Federal Candidate Support Offic	e Sought: House District:
Mary Landreau Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary X General Other (specify) ▶
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(a) SUBTOTAL of Itemized Independent Expenditures	2873.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	